PATENT	APPLICATION	SERIAL	NO.

U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

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NUTRITIONAL WEIGHT LOSS AGENT

AND METHOD

First Named Inventor:

Michael Wenniger

Domestic/Foreign Application:

Domestic Application

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Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 1070974 CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE SMALL ENTITY OR **TOTAL CLAIMS** RATE FEE RATE FEE FOR BASIC FEE OR BASIC FEE NUMBER FILED 385.00 NUMBER EXTRA 770.00 TOTAL CHARGEABLE CLAIMS minus 20= OR - XS18= XS 9= INDEPENDENT CLAIMS minus 3 =X43=X86= OR MULTIPLE DEPENDENT CLAIM PRESENT +145= +290= OR If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL **CLAIMS AS AMENDED - PART II** OTHER THAN SMALL ENTITY (Column 1) SMALL ENTITY OR (Column 2) (Column 3) CLAIMS HIGHEST ADDI-4 ADDI-REMAINING NUMBER PRESENT AMENDMENT TIONAL RATE TIONAL **AFTER** RATE PREVIOUSLY **EXTRA AMENDMENT** FEE PAID FOR FEE **Total** Minus X\$ 9= X\$18= OR Independent Minus X43 =X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= +145 =OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-AMENDMENT E REMAINING NUMBER **PRESENT** RATE TIONAL AFTER **PREVIOUSLY** RATE TIONAL **EXTRA AMENDMENT** PAID FOR FEE FEE Total Minus ** X\$ 9= X\$18= OR Independent Minus = *** X43= X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= +290= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST C ADDI-ADDI-REMAINING **PRESENT** NUMBER AMENDMENT **AFTER** RATE TIONAL **PREVIOUSLY** TIONAL RATE **EXTRA AMENDMENT** PAID FOR FEE FEE Total Minus = ** X\$ 9= X\$18= OR Independent Minus = *** X43 =X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= +145= OR' * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL ** If the *Highest Number Previously Paid For IN THIS SPACE is less than 20, enter *20.* ADDIT. FEE ADDIT. FEE **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.